Mental Health Literacy for Children with a Parent with a Mental Illness [English and Spanish versions]

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Acknowledgments
The authors acknowledge the Parental and Family Mental Health Worldwide group of international researchers and change agents committed to enhancing the lives of families living with parental mental illness where this work began. We especially thank Annick Bosch and Peter van der Ende for their contributions to the mental health literacy survey and systemic literature review.
Promoting mental health literacy is an effective strategy to protect the wellbeing of parents with mental illness and their children. Mental health literacy is part of health literacy; it is defined as “one’s level of understanding about mental health attitudes and conditions, as well as one’s ability to prevent, recognize, and cope with these conditions” (p. 182). Mental health literacy can be developed by mental health providers discussing mental illness, recovery, and coping with parents and family members, including children. Increased mental health literacy leads to engagement in mental health promotion and (for the child) prevention-focused activities.

Children’s Experiences of Having a Parent with a Mental Illness

Children with a parent with a mental illness are at higher risk for developing mental health conditions than children of parents who do not have mental illness. In addition to increased genetic risk, these children are more likely to experience stressful life challenges such as poverty, homelessness, school performance issues, and child-parent separations. These children may also be exposed to the social stigma and negative public attitudes that often accompany mental illness.

Within the family, children living with a parent with a mental illness describe having “good days” and “bad days”. On good days, when parents are functioning better, children report their family members are more likely to talk to each other positively, interact more, and have a meal together. On bad days, when parents experience higher levels of mental health symptoms, children report less family communication, more negativity (such as yelling), and less interaction (avoiding/ignoring each other). Additionally, on bad days, children engage in more household responsibilities and take care of younger siblings more often than their same aged peers without a parent with a mental illness.

Sharing Information with Children about Parental Mental Illness

Riebschleger and colleagues interviewed parents with mental illness and their children. Parents reported that the main way their children get information about mental illness is from television. Most parents said they did not talk to their children about their mental illness; some felt they did not know enough about their illness to talk about the topic. Others said they did not know how to talk to their children about their mental illness. Despite this, most parents with mental illness reported wanting their children to learn about mental illness and recovery, especially if the information fit with the child’s developmental level.

Children with a parent with a mental illness reported that they do not understand much about mental illness. Some held stigmatized views of mental illness, such as describing people with a mental illness as “slow,” “unable to work,” and “unlikely to have a good life”. Children wanted to know more about their parent’s illness to understand what is happening to their parent. For example, children asked for information about ways to cope with their parent’s mental illness, how to help their parents and others living with mental illness, and what goes on in recovery.
Mental Health Literacy for Children

Children with a parent with a mental illness are likely to benefit from accurate, non-stigmatizing information about mental illness and recovery. Children could learn that mental illness is a real health issue and they are not to blame for a parent’s illness. Children could learn how to respond to stigma and find hope in discovering that mental health treatment can be quite effective. Mordoch noted that children with a parent with a mental illness demonstrate increased coping skills with access to information and knowledge about mental illness and recovery. Additionally, children can experience a sense of empowerment through this process.

Mental Health Knowledge Content

The authors are developing a scale to measure the mental health knowledge of 11- to 15-year-old children with a parent with a mental illness. Content specific to mental health literacy for the scale was derived from a systematic literature review and a survey. The literature review included fifty scientific articles that focused on children’s, parents’ and professionals’ perspectives of child mental health literacy content. In addition, the researchers surveyed members of the Parent and Family Mental Health Worldwide research collaborative and asked about specific mental health literacy content recommended for children who had a parent with a mental illness.

Thematic analysis of these data identified critical contents of mental health literacy for children, and were generally consistent across the literature review and the survey. Mental health literacy content relevant for all children included:

- Describing mental illness;
- Learning about recovery behaviors;
- Recognizing mental illness stigma;
- Managing stress;
- Finding help for one’s own mental illness symptoms; and
- Helping others with mental illness symptoms.

Content specific to children with a parent with a mental illness included the constructs above as well as additional, family-focused knowledge items such as:

- Responding to stigma experiences;
- Talking to family members and others about mental illness;
- Preparing for crisis situations; and
- Adapting to good days and bad days in the family.

Efforts that Support Mental Health Literacy of Children

While focusing on mental health literacy for children is a relatively new movement, there are a number of rapidly emerging programs to support these efforts:

- **Think Family Model** - Urges health care professionals to talk to parents living with mental illness and their children about mental health.
- **Let’s Talk about Children Program** - Trains professionals to have structured discussions with parents who experience mental illness about parenting and their child’s needs.
- **The Think Family – Whole Family Programme** - Built on the foundation of Let’s Talk about Children; it is a family-focused training and intervention program that aims to enhance family communication in families where a parent has a mental illness. Think Family – Whole Family is now implemented across all health services in Finland.
Next Steps

Within this emerging field of child-focused mental health literacy, there is a need to build, implement, test, and expand evidence-based mental health literacy programs using a family approach. This will contribute to current knowledge about what works for meeting children’s mental health literacy needs. An increase in evidence-based programs can be part of important efforts to reduce developmental risks and increase resiliencies among children that have a parent with a mental illness. Consumers, family members, and especially children with a parent with a mental illness, should be actively included in program efforts to enhance children’s mental health literacy.

Acknowledgements

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